

den and disappoint the community already overtaxed, to lower the standard of professional character, and raise empirics to the level of honest and enlightened physicians." Pp. 55-57.

These liberal extracts will give an idea of the general scope and tendency of the work before us. It should be extensively read by the community at large, and thoroughly studied by every one who pretends to practise medicine in an enlarged and liberal spirit. And if every medical student were henceforth required to study its pages as a pre-requisite to receiving a degree, the Colleges would thereby confer a greater benefit on coming generations than by increasing the number of lectures on therapeutics or enlarging their cabinets of materia medica. In a word, the principles inculcated in this work must hereafter be the guide of every practitioner who, however "regular" he may be in other respects, would not lose all claim to the more distinctive and more honorable title of "Rational Physician."

B. E. C.

CASES OF SCARLATINA.

[Communicated for the Boston Medical and Surgical Journal.]

BY WALTER CHANNING, M.D.

CASE I.—A girl, aged 5 years, was seized with vomiting in the night, and soreness in the throat in the morning, of Friday. I found her, at an early visit, feverish, with noisy hoarse respiration, and a croup-like voice. Some swelling of the tonsils and diffused redness of the fauces were discovered, on examination. On Sunday, the whole skin was covered with scarlet rash. I have never seen this more pronounced. Very little constitutional disturbance existed. Food was earnestly demanded, and the strength was but slightly diminished. Convalescence began on Tuesday, and proceeded without interruption.

CASE II.—A sister, 8 years old, was attacked on the following Sunday evening with vomiting and diarrhœa. I found her in bed, with sore throat, hoarse, rough voice, and very pale skin. She has always been thin and pale, but very active, cheerful, of singularly happy temperament, of intellectual power far beyond her years, and among her young friends a great favorite. The deep interest in her at home was at once discovered by the anxiety which her illness produced. For two months she had been troubled with an obstruction of the nose, which obliged her to breathe through the mouth. This was a great annoyance during most of her illness; the fauces and whole mouth were constantly kept dry by breathing through the mouth, demanding drink for relief. Her pulse was quick, and somnolency was a prevailing state. She, however, was easily roused, and discovered a perfect clearness of mind, almost throughout her disease. She craved food, and relished the liquid farinaceous diet allowed her. Examination showed

redness of the fauces, but little swelling of the tonsils or neighboring parts. The scarlet eruption appeared on Wednesday. It was universal, but had none of the intenseness of color of the first case. There was, however, more restlessness, and general irritation of the skin. Inunction gave great relief, and was urgently demanded. Olive oil was used, and as freely as circumstances required. On the sixth day from the attack, there was remission of all the symptoms. The pulse, voice, state of skin, manner, all showed the change. She had never complained, always saying she felt very well, but to-day her whole appearance showed that an important change had occurred. I was quite willing to agree with her parents and other attendants that she was better. So great had been their anxiety, that her mother had not left her from the first day of her attack, not even to change her dress, or to go to bed, and the devotion of her father was as remarkable, he never leaving the house except on business which obliged him to be from home. But while I expressed pleasure at the apparent convalescence, I could not but say to them that I felt uneasy concerning the result; that uncertainty attached to every case of the disease, and that there had been from the first in this case something which I could not well define, which made me regard it with suspicion from the beginning, and I referred to the frequency of my visits to show what my feelings had been in regard to it. I had daily visited her, before sunrise, noon, and late in the evening.

On the seventh day of the attack, I found her very ill. She had been seized, since my last visit, with rheumatism, which had passed from joint to joint until every one was attacked. The head was fixed, and a slight swelling of a gland about mid-way on the right side of the neck had increased so as to extend from the angle of the jaw to the shoulder, and broadly behind and before. Œdematous swellings had occurred in the limbs beyond the rheumatic enlargements, and the whole face was swollen. The eruption had not disappeared, and now the irritation of the surface returned, making a case of suffering which I have rarely seen in the practice of a long life. Erysipelas next appeared upon the tumor of the neck, which soon extended beyond its hard boundaries. The appetite did not fail. The pulse was very rapid and thrilling. The heat was great. She took her food with evident pleasure. Swallowing was easy. The renal excretion was abundant, and from being turbid in the earlier days of the disease, had become clear, and of a natural color. The bowels were regular, or were readily moved by mild injections.

On the fourth day improvement again declared itself. The erythema disappeared. The swelling of the neck diminished. The rheumatic joints were less swollen, and the limbs could be moved. She bore well such motion as change of place in bed made necessary; and again it seemed possible that she might recover. But this state was of but short duration. Strength failed,

and delirium at night occurred. Accumulations of dense, transparent mucus took place in the throat, which it required more and more effort to dislodge, till on the sixteenth day of the disease she began to sink, and in the course of the day she died, suffocated.

Nothing has been said of the treatment in this case. It was regulated by circumstances. The indications were to support the strength, or to do nothing which might impair it; and to relieve suffering. The disease had its cause in a poison, and the result depended upon the force of the attack, the powers of the system to resist this, together with the aid which remedies might give to the constitutional powers of the patient.

CASE III.—A sister, aged about 3 years, was attacked on Monday, the day following that on which the second occurred. The disease came on with night-vomiting, with hoarseness of voice, but with no complaint of throat. Eruption followed promptly, and was as strongly marked as it was in the first case. She was fleshy, with good color, and of excellent constitution. She was hardly laid up, being in arms, or walking about the chamber, with excellent appetite. She was clamorous for food. No pain was complained of when swallowing, nor any physical discomfort whatever manifested. She recovered without any accident.

CASE IV.—Mr. —, the father of the above, aged about 35 years, was taken on the Saturday following. He was seized with vomiting and diarrhoea in the night, and had sore throat the following morning. He had been with his sick children constantly, and when absolutely obliged to go to bed, he remained on it but for a short time, and was up and watching again, day and night. His throat was exceedingly sore. He had no eruption, and was convalescent in about a week.

CASE V.—Miss —, a sister of the mother, aged 32 years, who had come to assist her, took her bed on the Thursday before Mr. —. Disease began with vomiting and diarrhoea, and pursued very much the course of that just reported. The soreness of the throat was exceedingly distressing, and universal malaise required her to keep her bed constantly for three or four days.

Mrs. —, mother of the children, also a servant woman, a female lodger, and a female friend who came to aid Mrs. —, all had sore throat; the last was so severe as to make it necessary for her to go home. The others kept about, not because it would not have been preferred by them to have gone to bed, but because of the demands made upon them by the severe illness and suffering around them, and which required constant attention.

The mortality in this family was not great, considering the suddenness and rapidity with which its members were attacked, and the severity of the first seizures. The throat gave little trouble in the children, in whom the eruption was so prompt, and declared; whereas, in the adults there was great suffering from the throat-

ail. The stomach was disturbed in almost all, and full precursory vomiting in five. It would seem, from the marked relief in the children, especially in the two first, which followed the eruption, which in these was so perfect, that the subsequent state was decidedly modified by it. This was almost as striking in the fatal case as in her sisters. In these last, however, the complications of the disease, or its sequelæ, did not happen, and recovery was rapid and complete.

I well remember a family of five children, who had scarlatina at or nearly the same time. Two were seized on the same day. They were struck down together, as if by cholera. Reaction appeared in neither of them. I found them pale, cold, unconscious, and almost pulseless. So they continued till their sudden death; and they were buried together. In the third, the disease showed itself in the throat, and on the skin, but death occurred not long after the seizure. In the fourth, chronic disease followed, and death some weeks after the attack. The eldest, a boy, survived.

From the comparative mildness of the disease, in the adults, in Mr. —'s family, the inference was that they had had scarlatina before, and that this had modified the present attack in them. All its symptoms, save eruption, were present. Something of the same kind is observed in smallpox hospitals. In these, the nurses, and sometimes the physicians, are seized with some of the symptoms, and this, too, when they have not only had cowpox, but variola itself. In these cases, I am told, the skin shows the disease; some slight eruption following its formative stage, or that of access. These facts bring strongly before us the question if something might not be done to produce the modified form of this disease, which occurs in those who have had it before? Prophylactics, so called, and those too which have some fame, as belladonna, can hardly be relied on. Compare the recent cases reported in this paper, with those which occurred under my own care some years ago, in another family, and were so fatal, and say, what could have prevented the same fatal progress in the latter. These inmates were all poisoned at the same time, and the difference there was between the attacks may be referred safely to some condition of the subjects. Except in the fatal instance, all were fairly convalescent one week from the day of the attack, and death occurred in the fatal one on the sixteenth day from invasion. This case brought to my mind that of a nephew, who had scarlatina several years ago so severely as to leave no hope of recovery. He had all the sequelæ, too—namely, erysipelas, rheumatism, anasarca, ascites, the whole—and recovered after many months' illness, but was long liable to attacks of rheumatism, which made him a great sufferer. Pneumonia, also, became a severe and dangerous trouble to him, so that for several years he has given up animal food, and has had excellent health since.

Between four and five hundred deaths from scarlatina occurred

in Boston the last year, making above a tenth of the whole mortality. Few facts can more strongly teach the importance of a prophylactic. I believe it has been attempted to produce measles by inoculation, with what results I do not remember. Why not attempt the prevention of scarlatina by like means? We know not why inoculation is, as a rule, safe in variola, the deaths being almost as nothing to the recoveries, when compared with those which follow natural smallpox. Why may we not, it has been asked, look to the same results from inoculated scarlatina, if such a thing be possible.

I said that, notwithstanding the favorable changes more than once observed in the fatal case, anxiety about the result was never absent from me. It is not easy, at least with me, to explain this fact in my prognosis in a grave disease. My visits were frequent in this case, and once this was referred to by me to the parents, as it might lead them to think that I supposed danger existed, even when things seemed so favorable as reported. It is common with me to be hopeful, when to others there may seem no hope. Diagnosis is rapid. What a case is, or what it is to me, follows very soon upon its examination, and the knowledge thus obtained remains until new revelations are made, or other examinations modify the teachings of the first. Prognosis gets its character from this mode of investigating or regarding disease. It is not from the apparent severity of symptoms that I prognosticate unfavorable results, for in the presence of the severest I often feel an assurance that recovery will happen. In other words, the weight of disease or the amount of danger is not measured alone by existing symptoms. Consultations in midwifery may have done something to produce this intellectual habit. We are called to these when danger is supposed to be imminent, or that it is no longer safe to leave the case as it is. Something may be recommended or done which in a short time gives an entire new aspect to the case, and recovery follows. Again, we are called when danger is not apprehended, but we see at once, almost intuitively, that recovery is impossible. Is it not an intuition? And is it not by the same intellectual process that we reach similar results in other departments of medicine?

The house in which these cases occurred is in one of the most elevated parts of the city, and is well ventilated and drained. I have since heard of two other families in the neighborhood, in which scarlatina had appeared, in one about the same time as I was attending the cases reported. Three children were then ill. The other house was further than this from my cases, and five children were attacked. I have not learned what has been the result in any of these instances. Is scarlatina contagious? Or is it the product of epidemic constitution, whatever that may be? The popular belief is that it is contagious. Some physicians have the same opinion. A young man came from another town to visit the

family in which the cases in this paper appeared. Scarlatina of a very severe character was in the family he left. He came between eight and ten days before the first of the above cases occurred. Did he bring the disease into this family? Scarlatina was epidemic at the time here. It was over the whole city, and country, and had been so for a long time. It existed in families quite near to that in which the above cases occurred. Was not the invasion, after the arrival of the young man, a mere coincidence, rather than an effect? But the time between his arrival, and the invasion, was the usual period of incubation of the disease in cases of strangers coming unprotected into an epidemic atmospheric constitution. Yes. But why is not a whole people attacked at the same time? In this very family the attacks were not simultaneous; and yet they occurred too near each other to suppose they had been poisoned by the first case. The cause reached to the whole family. Its effects were various, and doubtless depended upon circumstances about which we may speculate, but probably without reaching any satisfactory conclusion.

A few days ago I was present, with other physicians, at an operation done for the relief, if not the cure, of apparently a very dangerous surgical disease. A question of prognosis occurred, and in my answer I said I thought Miss — would recover. There was present our friend Dr. J. B. S. Jackson, whose strong and enlightened zeal in medicine we all know. Said he to my remark, "I remember, when house physician in the Massachusetts General Hospital, during your service, a very, very unpromising case of typhoid was under treatment. A student asked if the patient would not die. 'No,' said you, '*he is too sick to die.*' The man recovered." This allusion to the relation between Dr. J. and myself was made by him some time after the cases of scarlatina. The above remark on prognosis has been doubtless made by others, and in the severest, apparently the most hopeless cases. Whence comes the strong feeling of eventual recovery in some of these, will probably be explained with difficulty by physicians who have experienced it.

W. C.

THE INDIVIDUAL RIGHTS OF PHYSICIANS.

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MESSRS. EDITORS,—The reply of your correspondent, W. E. C., does not seem to call for a rejoinder on my part, inasmuch as he waives the question at issue, and confines himself to trivial personalities. But to your readers I would say, that my object was not to defend Dr. Morton nor Dr. Davis; nor was it to open the ether controversy. It was to protest against the growing tendency now manifest, to sink the individual in the profession; a

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